

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	H.T.	913	05/04/01
RESPONSE FORMALITY REVIEW	<i>[Signature]</i>	1091	6-12-01

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	2/24/01	
2	✓	2/24/01	
3	✓	2/24/01	
4	✓	2/24/01	
5	✓	2/24/01	
6	✓	2/24/01	
7	✓	2/24/01	
8	✓	2/24/01	
9	✓	2/24/01	
10	✓	2/24/01	
11	✓	2/24/01	
12	✓	2/24/01	
13	✓	2/24/01	
14	✓	2/24/01	
15	✓	2/24/01	
16	N		
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33	✓		
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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